

Legal Name: KINDER MORGAN LIQUID TERMINALS LLC

Common Name: LINNTON TERMINAL

Facility Location: 11400 NW ST HELENS RD, PORTLAND

Submit report monthly by 15th of following month to:

Oregon DEQ

2020 SW 4th Avenue, Suite 400

Portland, Oregon 97201

Site/File ID #: 32300

County: MULTNOMAH

Month/Year fine 2003

NPDES 001

Monitoring for Oil/Water Separator TANK 3034

	Withittening for Oil Water Separator TANK 3034							
Day	Oil and Grease (mg/L)	Visible Sheen	Ethanol and/or MBTE	Flow				
	Frequency varies, see permit	Daily, visual observation	Quarterly grab sample, if present on site and in bulk	Daily estimate, when discharging				
Limit	10 mg/L monthly, 15 mg/L daily max.	No visible sheen at any time	No limit	No limit				
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Stormwater Monitoring

Only for facilities required to have NPDES permits for stormwater, per 40 CFR 122.26 Monitoring required for each point identified in the Stormwater Pollution Control Plan

Day	Visible Sheen	Floating Solids (associated with industry)	Total Copper (mg/L)	Total Lead (mg/L)	Total Zinc (mg/L)	pH (S.U.)	Total Suspended Solids (mg/L)
	Daily when discharging, visual observation	Once per month when discharging	Twice per year, grab sample	Twice per year, grab sample	Twice per year, grab sample	Twice per year, grab sample	Twice per year, grab sample
Limit	No visible sheen	No visible discharge*	0.1 mg/L*	0.4 mg/L*	0.6 mg/L*	Within 6.0 to 9.0	130 mg/L*
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^{*}These are benchmarks, not effluent limits. If benchmarks are exceeded, review/possible revision of Stormwater plan is required. See permit for more details.

Signature Requirement

I certify, under penalty of law that this document and all attachments were prepared under my direction or supervision in
accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted.
Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the
information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that
there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing
violations.

Signature of Responsible Official \(\frac{1}{2} \) \(\frac{1}{2} \)	
Name and Title (Please Print):	Murphy Hear Market
Date of Signature: 7-1177	Telephone: 503 220 454



of following month to:

Oregon DEQ

2020 SW 4th Avenue, Suite 400

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Portland, Oregon 97201

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Signature of Responsible Official;	Lot stillmother.	
Name and Title (Please Print):	n Mussby Hz	ga Manage
Date of Signature: 7-30-03		503 220 1254



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Signature of Respons	sible Official: 🔠	M KIMMINN		
Name and Title (Pleas	se Print):	Mulphy	ARDA MANAGEL	
Date of Signature:	9-2-03	Teleph	one: 503-220-123	14



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